

Richard M. Flynn Commissioner

STATE OF NEW HAMPSHIRE DEPARTMENT OF SAFETY

DIVISION OF FIRE STANDARDS & TRAINING

BUREAU OF EMERGENCY MEDICAL SERVICES

33 HAZEN DRIVE, CONCORD, NH 03305 603-271-4568 TDD Access 1-800-735-2964 Toll Free NH 1-888-827-5367 Fax: 603-271-4567

Richard A. Mason Director

Suzanne M. Prentiss Bureau Chief

TRAUMA MEDICAL REVIEW COMMITTEE

COMMITTEE MEETING

June 20, 2007
Richard M. Flynn Fire Academy
Concord, New Hampshire

Members Present: John Sutton, MD, Sharon Phillips, RN, Rajan Gupta, MD, Cherie Holmes,

MD

Guests: Sue Barnard, RN, Sarah Greer, MD, John Prickett, RN, Richard Ciampa,

RN, Julie Biron, RN

Bureau Staff: Clay Odell, EMTP, RN

I. Call to Order

The meeting of the Trauma Medical Review Committee was called to order by John Sutton at 9:30 am on Wednesday June 20, 2007 at the Richard M. Flynn Fire Academy in Concord. NH.

- **Item 1. Introductions:** Attendees went around the table and introduced themselves. Clay announced Rajan Gupta, MD had been appointed to the TMRC by Commissioner Barthelmes.
- **Item 2. Minutes**. The minutes from the February 21, 2007 meeting were approved by email vote prior to the meeting. The April 18, 2007 meeting had been cancelled. There was no discussion.

IV. Committee Discussion Items

- **Item 1.** Renewal and Hospital Updates Androscoggin Valley Hospital and Memorial Hospital's applications are still on hold. Further action on the Seacoast hospitals will be tabled pending further action on the revision of the NH Trauma Plan.
- **Item 2.** Air Medical Transport Utilization Review This study has been held up for several months, but Clay hopes to have a chance to work on the study in July.
- **Item 3. NH Bureau of EMS Report** Due to time considerations Clay referred attention to the written NHBEMS report that was distributed at the meeting. He would be happy to address any questions or concerns about items in that report.

- **Item 4. Interfacility Transport Task Force** The IFT Task Force data collection project is complete. Clay will work with the Bureau's Research Section to generate reports for the committee. The task force continues to meet every other month.
- **Item 5.** Trauma Team Training Project Clay reports that a beta test of the Trauma Team Training Program was conducted at Weeks Medical Center in Lancaster and went very well. He will be making some improvements to the scenarios and is seeking a hospital to host the program in August.

III. Old Business

Item 1. Revision of NH Trauma Plan Clay presented a draft of the Administrative Components section of the revised plan. He asked members to read the draft and consider revisions or edits. The participants of the meeting reviewed and made changes to the draft. Clay will incorporate these changes and distribute the document for further review.

There was discussion about the statewide trauma registry. There was considerable interest in having the state's trauma hospitals submit data to the National Trauma Database instead of submitting to the state. The Bureau of EMS would be able to access data directly from the NTDB. This will be further discussed at a later date.

There was preliminary discussion regarding the Clinical Components section of the NH Trauma Plan. Dr. Sutton initiated the discussion regarding the status of Level II hospitals in NH. He feels that in light of all four current Level II hospitals difficulty in consistently providing neurosurgical services for trauma patients perhaps it might be a better approach for NH to have the current Level II hospitals become Level III facilities, and make the NH guidelines much more consistent with the ACS criteria. Level II criteria in the NH Trauma Plan would also be much more like the ACS guidelines for Level II. Current NH Level II facilities could certainly pursue that level by committing the appropriate resources. Dr. Sutton felt that this accurately reflects the status of NH trauma hospitals in the southern region of the state. Sharon Phillips reported that Concord Hospital is currently discussing the option of pursuing ACS verified Level III status.

Clay recommended a cautious consideration of this concept. He felt that historically the Level II hospitals provided comprehensive care for the majority of trauma patients in their catchment areas. He worries that dropping to a Level III status will relieve the hospitals of the high level of resources they currently provide as NH Level II facilities. He also expressed concern that the Level II facilities would balk at the perception that they would be dropping from a Level II to a Level III.

Clay will review the ACS criteria for Level II and III, as well as the NH Level II and III, and provide a summary report to the group.

IV. New Business Trauma Conference Planning The date for this year's Trauma Conference was set for November 28th. Clay will put together a subcommittee to plan the event.

V. Public Comment

None

VI. Adjournment

Dr. Sutton adjourned the meeting at 11:30. He advised the group that the next scheduled meeting of the Trauma Medical Review Committee would be August 15, 2007 at 9:30 a.m. at the Richard M. Flynn Fire Academy. Additionally he noted a scheduling conflict with the October meeting and rescheduled that meeting for October 24, 2007

Respectfully submitted:

Clay Odell, EMTP, RN Trauma Coordinator